

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	YH	753	
O.I.P.E. CLASSIFIER		73	8/30/00
FORMALITY REVIEW	Abode	JC826	10-104100
RESPONSE FORMALITY REVIEW	HA	858	04-04-01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	9/24/00
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	
19	✓
20	✓
21	✓
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
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31	✓
32	✓
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34	✓
35	✓
36	✓
37	✓
38	✓
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40	✓
41	✓
42	✓
43	✓
44	
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	
Original	9/24/00
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	
58	✓
59	✓
60	✓
61	✓
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Claim	Date
Final	
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If more than 150 claims or 10 actions
staple additional sheet her

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